

SEP 13 2002

510(k) SUMMARY
ASCLEPION-MEDITEC AG
Laser System BeautyStar 532

K 021975

This 510(k) summary of safety and effectiveness for the ASCLEPION-MEDITEC AG Laser System BeautyStar 532 is submitted in accordance with the requirements of SDMA 1990 and follows Office of Device Evaluation Guidance concerning the organization and content of a 510(k) summary.

Applicant: ASCLEPION-MEDITEC AG

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Contact Person: Dr. Dirk Colditz
Vice President Operations and
International Regulatory Affairs

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Preparation date: Mai 23rd, 2002

Device name: Laser System BeautyStar 532

Common Name: BeautyStar 532

Classification

Name: Laser surgical instrument for use in general and plastic
surgery
and in dermatology (21 CFR 878.4810)
Product code: GEX – Laser instrument, surgical, powered
Panel: 79

Legally marketed: in the European Community based on CE-Mark

Description: The Laser System BeautyStar 532 consists of a laser enclosure,
fiber
optic delivery system and an computer controlled treatment
parameter interface.

Intended Use: The laser system BeautyStar 532 intended for vaporization and
photocoagulation of vascular and pigmented lesions in soft
tissue.

Comparison to: The specifications of the BeautyStar 532 are the same as or
very similar to those of legally marketed lasers such as the HGM
Atlas-Elite, Model E-80, Corium 200/400 (K990174), Laserscope

Aura (K951034), Medart Corp. MedArt 470(K010885), Iridex Corp. DioLite 532 (K964074, Ceramoptec Ceralase G15(K002296) and Quantel Medical Viridis Derm (K020071)

Performance data: None. The specifications and intended uses of the laser system BeautyStar 532 are the same or very similar to those of claimed predicate devices.
Because of this , performance data were not required.

CONCLUSION: The BeautyStar 532 is substantially equivalent to legally marketed devices.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Asclepion-Meditec AG
William Kelley
c/o Asclepion-Meditec, Inc.
8884 Warner Avenue, Suite 167
Fountain Valley, California 92708

SEP 13 2002

Re: K021975

Trade/Device Name: Laser System BeautyStar 532
Regulation Number: 878.4810
Regulation Name: Laser surgical instrument for use in general and plastic surgery and in dermatology
Regulatory Class: Class II
Product Code: GEX
Dated: May 20, 2002
Received: June 17, 2002

Dear Mr. Kelley:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

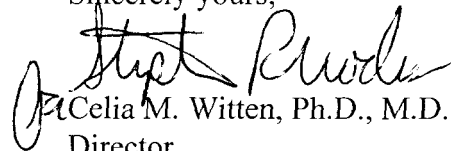
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 – Mr. William Kelley

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

A handwritten signature in black ink, appearing to read "Celia M. Witten", is written over the typed name.

Celia M. Witten, Ph.D., M.D.
Director
Division of General, Restorative
and Neurological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

INDICATIONS FOR USE STATEMENT

510(k) Number (if known): K021975

Device Name: Laser System BeautyStar 532

Indication For USE Statement:

The BeautyStar 532 is intended for Vaporization and Photocoagulation of vascular and pigmented lesions in soft tissue.

The laser system BeautyStar is restricted to sale to or use by licensed professionals in the United States.

(PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use ☒
(Per 21 CFR 801.109)

OR

Over-The-Counter Use ☐

[Signature]
(Division Sign-Off)

Division of General, Restorative
and Neurological Devices